

PUBLIC HEALTH NOTES

Abstracts by D. GREENBERG, M. P. HORWOOD and MAYO TOLMAN.

Is the Tuberculosis Campaign Based on Sound Principles?—Recently Dr. Raymond Pearl has questioned the value of the public health campaign. He maintains that public health officials fail to recognize the supreme importance of the racial factor in the control of mortality and morbidity rates, and as a result millions of dollars are squandered every year for public health work. He believes that the reason why communities varied in the amount of influenza they had was due to the differences in the biologic constitution and organic fitness of the people in each community. Dr. Armstrong, on the other hand, has found that although the racial factor is exceedingly important in determining the tuberculosis mortality and morbidity rates of a community, that race habits are equally important. Furthermore, Dr. Dublin has shown that the mortality rate from tuberculosis of the lungs among the white policyholders of the Metropolitan Life Insurance Company, has decreased 42 per cent from 1911 to 1919 among those persons in the age group from 35 to 44. He believes that the reason for this can be found in the intensive campaign of public health education, which communities and private agencies have waged during this period. Increased knowledge of the principles of personal hygiene has aided in diminished death rates. The Journal of Outdoor Life concludes that the tuberculosis campaign is based on sound principles, and that the campaign should be broadened to include other fundamental factors which bear on the prevalence of the disease.—*Journal of Outdoor Life*, April, 1920. (M. P. H.)



Summary of Sanitary Situation in Oriental Europe.—The Central Bureau for the Control of Epidemics of the League of Red Cross Societies reports under date of January, 1920, a resumé of sanitary situations regarding epidemic diseases in Austria, Hungary, Czecho-Slovakia, Poland, Ukrainia, Roumania, Jugo-Slavia, and Italy. Typhus fever is the most wide spread and the most severe, constituting a source of great danger not only for eastern Europe but for the whole continent. It is spread throughout Russia and the epidemic is most virulent in the territory constituting the recent theater of war on the

eastern front. Smallpox is similarly especially prevalent in this area, but has been successfully combatted in all those states which have instituted vaccination, either voluntary or compulsory on a large scale. Up to the time of the report plague was officially reported only from certain places in western Asia and southeastern Europe. But it is rumored to be present also in Ukrainia and Czecho-Slovakia. Cholera, while wide spread in that part of Russia adjacent to Poland, has so far not obtained a foothold in that country itself.—*Revue Int. Croix-Rouge*, March, 1920. (H. N. C.)



\$15,000 for Health Work in the Dominican Republic.—An additional appropriation of \$15,000 has been made by the American Red Cross for hospital work among the poor of the Dominican Republic, following an investigation of health and sanitary conditions there by Dr. John M. Swan. A physician will be provided by the Red Cross to administer the Seybo Hospital as well as nursing personnel for the Municipal Hospital at Santo Domingo City. Certain necessary hospital and medical supplies will also be furnished, and a training school for native nurses will be established in the city.—(J. A. T.)



Health in the Virgin Islands.—What the American flag means to the Virgin Islands, expressed in terms of life and death, is shown in vital statistics for the first quarter of the present year revealing a decided decline in the death rate. Health and sanitation work is under the direct supervision of the American naval government. The American Red Cross, which, through its Insular and Foreign Division has in the last two years spent nearly \$44,000 for the equipment of hospitals on the Island, has also been of great and timely assistance in improving conditions.

A statement by the chief municipal physician of St. Thomas and St. John shows that the death rate for the first three months of 1920 is the lowest on record in the municipality. It is about one-half of the death rates recorded for the other (English, French and Dutch) West Indian Islands, and is .4 below the 1919 death rate of the registration

area in the United States. In addition the birth rate exceeded the death rate by more than 133 per cent. while infant mortality was 76.9 or less than one-half of that recorded in the surrounding islands and considerably below the rate in the States. The record is all the more remarkable because December, January and February are the months when mortality is slightly higher than at other times.

Funds for the administration of the islands are limited but in spite of this in two years the general death rate has been lowered from 39.5 per thousand to 13.6 and infant mortality from 251.7 to 76.9.—(*J. A. T.*)



Public Health in Tasmania.—Any country that has a death rate of 8.84 commands the interest as well as the respect of public health officials. The annual public health report of Tasmania demonstrates that this distant island is, as the geography states, "salubrious." With a population of a little over 200,000 and a birth rate of 25.91, diseases of early infancy caused 149 deaths, cancer 145, tuberculosis (all forms) 124 and influenza 37. The highest figure of all is for diseases of the circulatory system which caused 248 deaths. The only other disease which reaches three figures in the "causes of death" tables are those of the nervous system, 177; the respiratory system, 212; and the digestive system, 158. Deaths from infectious diseases are measured by units or tens.

A child welfare association conducts home visiting, lectures, talks and demonstrations at a center. Two-thirds of the total expenditure of the health department went for the prevention and treatment of influenza. The laboratory reports indicate that supervision of food, especially milk, is actively pursued and that the department is by no means slow to take legal action when occasion arises. The general tenor of the report gives one the impression that the Tasmanian health department is full of youthful vigor.—Editorial, *Medical Officer*, May 1, 1920.—(*H. N. C.*)



Insanitary Post Offices.—"Many of the post offices of the country are not fit for the purpose for which they were erected. In addition, insanitary conditions prevail in some of the largest. A notable example is the

Chicago post office, the sanitary condition of which has been a source of complaint for over a decade. Lack of ventilation, proper lighting, and even of ordinary cleaning have been continuously complained of without redress. Such surroundings contribute to a lowered efficiency, a higher sick and death rate, and an earlier superannuation. Uncleaned, even undusted, mail sacks not only spread germs through the offices but must contaminate the mail received by the public. Tuberculosis rises to the dignity of an occupational disease among post office clerks."—Speech by Mr. Nelson in the House of Representatives on April 29. Reported in the *Congressional Record*.—(*J. A. T.*)



Influenza and Tuberculosis.—Amberson and Peters in a critical review of the recent writings on the effect of the influenza epidemic on tuberculosis, and in an analysis of their own cases have come to the following conclusions: (1) What evidence we possess does not lend any support to the belief that the usual severity of an influenza attack is less among the tuberculous than among the nontuberculous; on the contrary pulmonary complications seem equally frequent, and our statistical records indicate that the case fatality of influenza among the tuberculous was higher than among the general population. (2) In a certain number of individuals epidemic marks the inception of definite pulmonary tuberculosis which did not previously exist as clinical disease. The onset of pulmonary tuberculosis following influenza may be rapid and immediate or insidious and remote. We believe that to ignore or deny the possibility of pulmonary tuberculosis as a *sequela* is to defer diagnosis and treatment of a number of patients requiring treatment unduly, with resulting limitations of their chances for recovery. (3) Among those already tuberculous, influenza may to a varying degree have reactive, quiescent or apparently inactive lesions. Such reactivation may be marked by a temporary exacerbation of symptoms of short duration or by the classical evidences of a severe relapse. That a large number do not pursue such a course and do escape definite permanent damage is not denied.—J. B. Amberson Jr. and Peters Jr. *Amer. Rev. of Tub.*, Apr., 1920, 71. (*D. G.*)

SYMPTOMS OF ILLNESS IN CHILDREN

These directions, phrased in language which may be understood by the parent or teacher, have been issued by the New York State Department of Health, Hermann M. Biggs, M. D., Commissioner. They are so direct that they merit the widest circulation, and the JOURNAL is pleased to be a factor toward that circulation.

Symptoms of illness in children which should be observed by parents and school teachers and their significance

GENERAL SYMPTOMS

Any deviation from the normal in a previously healthy child.

Disinclination to study or play
Unusual "tired feeling"
Drowsiness
Lack lustre of eyes
Cheeks flushed or pallid

SYMPTOMS OF FEVER
May be the beginning of an acute infectious disease or simply stomach trouble, intestinal infection or "cold."

These symptoms mark the beginning of most children's diseases.

Chills

The earliest symptoms of many acute infectious diseases; always demand attention.

Vomiting

May be due to simple gastro-intestinal disorder (indigestion). May be early symptoms of scarlet fever or other communicable disease.

Sweating

May be profuse and has probably followed a preceding chill or fever.

Nervousness
Restlessness

May indicate beginning disease of brain or spinal cord, or a functional nervous disorder; St. Vitus dance or epileptic fits. May be due to eye strain, skin disorder, insufficient sleep, etc.

Irritability

Cough

May be beginning:
Whooping cough
Tuberculosis
Measles
Simple cold or influenza (grippe)

Loss of weight

Particularly if associated with slight fever, swollen glands of neck, a limp, or pain in the back, may suggest tuberculosis.

Cold in the head

Especially with running nose and eyes: first symptoms of measles, or German measles. May be simple cold or influenza

Pallor

Indicates impoverished blood. With puffiness of the face may indicate kidney disease, especially after scarlet fever.

Frequent requests to go to the toilet

May indicate trouble with bowels, kidneys or bladder.

LOCAL SYMPTOMS

Swelling in the neck

May indicate:

Mumps
Tuberculous glands
Beginning of diphtheria
Suppurating glands after scarlet fever or measles
Bad teeth

Eruptions on the skin

May be one of acute infectious diseases. May be one of communicable skin diseases, ring worm, impetigo. If eruption is accompanied by scratching, may be, if on head, lice; if on hands and body, itch.

Discharges

If from nose, throat, ears or suppurating glands may be the result of measles or scarlet fever.
If irritating, creamy, or bloody from nose may be nasal diphtheria.
If from one nostril may be foreign body in nostril.

*Scowling**Squinting**Headache**Holding book improper distance in reading**Eyes red*

May be "Pink Eye," eye strain or beginning measles or German measles.

Eyes discharging

May be granular lids or beginning measles.

Sore throat

May be first sign of
Diphtheria
Scarlet fever
Tonsilitis
Measles
Septic sore throat

Earache

May be due to adenoids or beginning middle ear disease.

Running ears

Middle ear infection (otitis). May be complication after infectious disease. May be due to adenoids.

Pain

If referred to hip and accompanied by limp or inability to bear weight on limb: may be first symptoms of tuberculous hip disease.

If referred to back, may be beginning of Pott's disease.

If referred to right side of abdomen, may be appendicitis.

If referred to back of ear, may be beginning of mastoid disease.

If headache, may be beginning of meningitis; may be symptom of inflammation anywhere.

Salaries of Health Workers.—"A man faithful to his ideals frequently gets a thin time from some of the noble philanthropists who adorn our town councils." So writes a correspondent, evidently a health officer, to the *Medical Officer*. Health workers in Great Britain are apparently considerably exercised over the matter of salary. In this issue of the magazine devoted to their interests appear four items concerning remuneration and one on security of tenure of office. Previous issues have more than once dealt with these subjects. Under "Notes and Comments," this journal says, "It is becoming more and more a scandal that medical officers of health as regards their conditions of appointment and their remuneration should be almost entirely subject to the caprice of local authorities." The Ministry of Health has evidently taken a hand in the matter though its influence is apparently not a controlling one. The medical magazines have naturally voiced their sentiments for higher salaries and one at least has refused to publish advertisements calling for health officers where the salary offered was below a certain minimum. The attitude of the local governing body regarding this stand of the profession is reflected in a note relating to a meeting of the Worcestershire County Council. This county was offering the post of Assistant Tuberculous Officer at a salary of £450. Medical papers had declined to print the advertisement stipulating a salary of £450. The Ministry of Health in a letter endorsed this. The Chairman of the Council "objected very strongly to this sort of pressure" and "felt very much adverse to allowing the medical papers or the Ministry to dictate to them." The Council was apparently convinced that assistant medical officers of health could be secured for £450 and voted to advertise in the daily papers.—*Medical Officer*. May 1, 1920. (H. N. C.)

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Uncle Sam Keeping Candy Pure.—Candy in interstate commerce, the United States Department of Agriculture tells the manufacturers, must be pure and must carry a label that tells the truth.

On the question of purity, harmless colors that do not conceal inferiority are permitted. The use of shellac and other gums for coating is prohibited. The department holds that saccharin is injurious to health and its use in

candy is prohibited. Talc, terra alba, barytes, chrome yellow, alcohol, narcotics, drugs, and mineral substances of all kinds are specifically forbidden in confectionery by the terms of the law. The use of cocoa dust in the manufacture of chocolate goods is held to be objectionable. A harmless mineral oil may be used for a slab dressing if used in such way that little or none of the oil is incorporated in the finished candy. Any of the decisions or opinions relating to the application of the Federal food and drugs act to confectionary may be obtained upon request from the Bureau of Chemistry, United States Department of Agriculture.—(J. A. T.)

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John Bull Pays for Healthy Babies.—John Bull believes that healthy babies make strong men, and is willing to pay for them, according to reports recently received by the Children's Bureau of the U. S. Department of Labor. In 1918 grants made by the national government in support of infant welfare work in England and Wales amounted to about \$1,150,000, which represents one-half of approved expenditure for welfare centers, "health visitors," maternity care and similar work for mothers and children.

The number of health centers increased from 850 in 1917, to 1,550 in June, 1919, over one-half of them supported entirely by public funds. Attendance at the centers has also shown a phenomenal increase.

As a result, it is thought, of public protection of maternity and infancy, the infant mortality rate for England and Wales for 1918 is 94. There was no increase over 1917 even under the adverse conditions of war and influenza.

The 1918 infant mortality rate for the U. S. birth registration area, just published, is 101, 7 points higher than the rate for the preceding year.

Children's Bureau investigations have shown that Uncle Sam's babies die because they and their mothers do not have skilled care.

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Do not take drugs to cure the headache, says the United States Public Health Service. Consult a physician, a dentist or an oculist, to see if the cause can be located. Often the eyes, or the teeth may be at fault.

Health Classes for Children.—The health class presents the possibility of communal service along various lines. It is an agency for general family adjustment in the matters relating to childhood. It possesses a vantage point for the prevention of tuberculosis, cardiac diseases and the development of defects of sight and hearing; as well as the correction of postural errors, and incipient deformities of the feet and spine. In a remedial way, it eliminates or palliates dietetic errors and lessens the likelihood of malnutrition affecting other children of the household. Health classes to function properly should be articulated with a general hospital or dispensary, the home and various agencies which can supplement and augment the work of the class. To provide for these articulations, it is essential to have a social service nurse and one or more friendly visitors, who can correlate the various agencies and activities. The knowledge and experience of social service nurses, broad as they may be, are insufficient to enable them to deal satisfactorily with many home problems. For this reason a teacher of domestic sciences and arts is almost a necessity. In addition to her special work with the home, it is designed to arrange for various classes for mothers and older children, with a view to instilling a working knowledge concerning the numerous phases of home making that are so intimately related with family health.

In his own classes the author has established a certain amount of competition among mothers by having 3 types of admission cards, indicating 3 relative degrees of proficiency in carrying out the instructions given, and in coöperating towards a higher standard of health habits and methods of living. Mothers are promoted and their own efforts determine the rating deserved.—I. S. Wile, *Arch. of Pediatrics*, Mar. 1920, 162. (D. G.)



Cats and Human Diphtheria.—Dr. Savage after examining bacteriologically the nose and throat of 8 healthy cats and 12 kittens which had not been associated with cases of human diphtheria found that all the kittens and 3 of the cats failed to show any bacilli which at all resembled diphtheria bacilli. In the case of the remaining five cats bacilli closely resembling the Klebs-Loeffler were recovered, but with one possible exception it was definitely considered that they were not

true diphtheria bacilli. The exception was in the case of a cat which was examined three months after the first examination.

Very similar results followed experiments on cats which were associated with cases of human diphtheria, and finally Dr. Savage sought to infect kittens with the disease artificially, for as he observes if, as so often has been asserted, cats suffer from diphtheria, or even if it be merely advanced that they act as carriers of the diphtheria bacillus in their throat or nose, it should be possible to infect them artificially and set up either condition. Feeding experiments were unsuccessful, throat and nasal swabbing met with a like result and contrary to expectation diphtheria bacilli implanted into the nasal cavities were unable to survive beyond a very short period. Dr. Savage expresses the definite opinion that cats do not act as diphtheria carriers, and further states that it would appear that the mucous membranes of these animals are particularly inimical to diphtheria bacilli.—W. G. Savage, *Jour. of Hyg.* Feb. 1920, 152. *Medical Officer*, Apr. 17, 1920.



The Fly a Carrier of Trachoma Virus.—

The direct transmission of the virus of the granulomatous conjunctivitis of hot climates is an obvious method of infection, and experiments have shown that the most trivial lesion of the conjunctiva renders the surface susceptible to inoculation. The possibility of infection by flies is also obvious; and in Tunis fresh cases of conjunctivitis occur most frequently at the beginning of the autumn, when flies are most numerous and troublesome. An Algerian monkey (*Macacus inuus*) is readily susceptible to the virus and, when infected, presents a granular conjunctivitis of the type occurring in man, which develops quickly, and becomes cured in about two months. In two experiments flies were kept for three hours in tubes containing the secretion from cases of trachoma, and were then transferred to a clean cage. After an interval of 24 hours in one experiment, and six hours in another, the heads and feet were cut off and pounded up with normal saline solution. Inoculation of the lids of the monkey, after scarification, with this material was followed by a granulomatous conjunctivitis of typical character.—C. Nicolle, A. Cuénod, and G. Blanc, *Compt. Rend. Acad. Sciences*, 1919, vol. 169, 1124. *Medical Officer*, Apr. 3, 1920, 135. (D. G.)

A BOTULINUS OBSERVATION

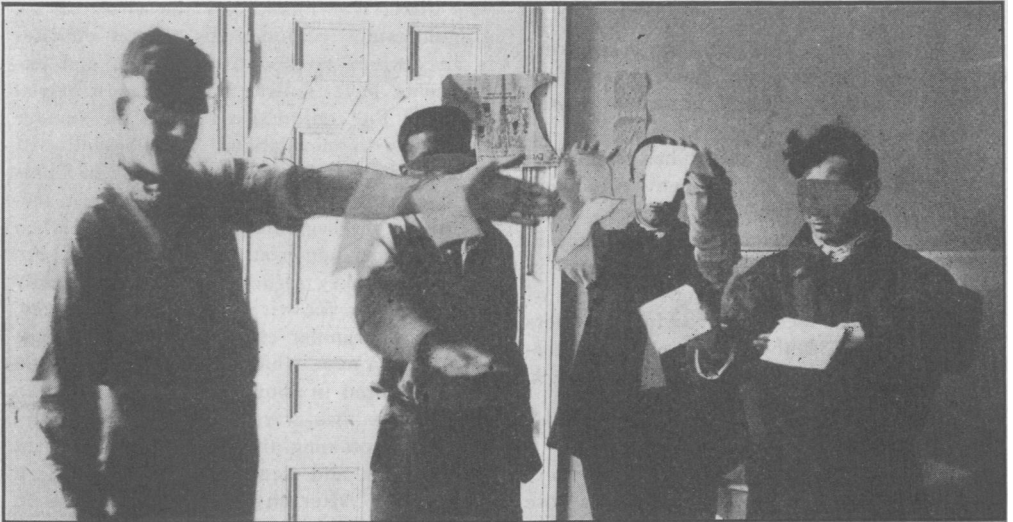
This interesting photograph, reproduced through the courtesy of Matthias Nicoll, M. D., of the State Department of Health, presents a group of patients in one of the state institutions who were suffering from botulinus poisoning. The outbreak occurred during February, 1920. The pieces of paper adhering to the walls and to the persons of these patients have been magnetized by them. If left undisturbed they would adhere to the men or the objects for a long time.

In his report of the occurrence, Dr. J. B. Ranson, Chief Physician at the institution, writes:

"In connection with this particular outbreak there were several features which have never been identified with any other reported outbreaks of botulinus poisoning which make it of particular interest for reference and study. One was the development of patches in the nose and throat of many of the patients; another one was the development of a peculiar static electric

phenomena, in that these patients, and these only, were able to magnetize sheets of paper to a remarkable degree; the paper after being magnetized by these patients would adhere to any object, walls and rooms for hours and very difficult to shake; these same patients, by rubbing their hands and touching the electric bulb, would cause the carbon filament to vibrate rapidly, even to come in contact with the side of the glass wall of the bulb."

The phenomenon of the magnetization of paper by persons in normal condition in winter weather is well known to physicists and popular experimenters. If these observations point to a febrile condition that specially induces such magnetic condition, they will be of interest in suggesting closer study of the new effect. Unless the men were really the only persons affected, it seems strange that the observers did not find the same phenomenon in their own handling of the paper, and the fact of controls is distinctly mentioned by Dr. Ranson.



Can the Tuberculosis Rate Be Reduced?—

The plan of the work reported by Cumming, who has already made several important contributions on the transmission of respiratory diseases, was: (1) to determine the presence or absence of tubercle bacilli on eating utensils after they were used by tuberculous patients; (2) to determine the presence or absence of these organisms on eating utensils after these were washed by the usual hand method in hot water; (3) to determine their presence on the hands of patients, and (4) to determine their presence in the air of tuberculosis wards.

He investigated spoon wash water, spoon rinse water, hand scrapings and air washings. Since tuberculous sputum passes through the oral cavity on its way from the lungs of the tuberculous to the exterior, this cavity becomes contaminated. Objects that enter the mouths of these patients become contaminated with the specific organism. As eating utensils are the most frequent inanimate objects which come in contact with the mouth, it is to be expected that guinea pigs injected with the wash water from eating utensils of the tuberculous patient would die from tuberculosis. Thirty-five per cent of the animals so injected died from the injection.

But the outstanding feature of this series of experiments is that the percentage of deaths, 25, from the rinse water injections was almost as great as that from the wash water injections. It is believed that the hand washing of the spoons in this series of experiments can be taken as representative of the usual method of washing eating utensils. If this is so, the difference in the percentage of deaths between the animals injected with washings and rinsings indicates that only about 30 per cent of the spoons used by tuberculous patients are rendered free from the organism by the usual hand method of washing.

This group of rinse water injections, with its 25 per cent mortality, demonstrates the facility of tuberculosis transmission and indicates that in families the eating utensil is the major avenue of distribution. The universal application of the principle of eating utensil asepsis will accomplish more in the control of tuberculosis than will any other single measure of practical application.—J. G. Cumming, *Jour. A. M. A.* Apr. 17, 1920, 1072. (D. G.)

Prophylaxis of Infantile Diarrhea.—

The author reports the remarkable record maintained at a home for infants, where for a period of 22 years no case of diarrhea originated in the home and there was not a single death from that cause. He attributes this result to a strict system of dealing with the children. (1) All incomers were isolated on arrival until such time as it was certain that their motions were normal. (2) A special room provided with washing apparatus and slop sink, was set apart to which all babies had to be taken whenever the napkins required changing. (3) As the napkins were removed they were immediately placed in a disinfectant, the nates were washed and bathed with a disinfectant, the nurse washed and disinfected her own hands, and those of the child and then put on fresh napkins. (4) A special nurse was detailed for this duty, and she was not permitted to take part in the preparation and distribution of food to the children. (5) The food was kept in a larder and, except at meal-times, was out of all contact with the children and their service.—G. D. Sherwood, *Lancet*, Apr. 24, 1920, 906. (D. G.)



Early Diagnosis of Tuberculosis with X-Ray.—There are two methods of X-Ray examination of the thorax, radioscopic and radiographic. With the former one can study the function and with the latter the structure of the lung. Since functional derangement frequently precedes visible structural change it will be evident that in many cases we must look for the earliest manifestations of disease in the radioscopic picture (fluorescent screen). The importance of observing any limitations of diaphragmatic movements as an early sign of tuberculosis has long been realized. In the experience of the author there is a stage even earlier than that of actual limitation, this stage can best be described as hesitation, and it is his belief that this is, so far as our present knowledge goes, the earliest sign of infection. In a typical case it will be seen that the diaphragm on the affected side commences its descent during inspiration a fraction of a second later than on the sound side.—M. Berry, *British Jour. of Tuberculosis*, Jan. 1920, 12. (D. G.)

THE PRIVY AND THE WELL

A PHILIPPINE STUDY IN CAUSE AND EFFECT

The happy days of childhood we often call to mind; we love to live them o'er again by memory's light refined—Zacate and camotes in the field of fragrant hay, the garden and the privy, and the well not far away. The back yard with its litter of manure all around about; the garbage heap where flies galore flew buzzing in and out; the pig-sty and the chicken coop; the dogs that played all day on the ground used for a privy, with the well not far away. We took our joys and sorrows as they chanced to come along; my brother had "makati" and he didn't grow up strong; Juanith died of fever—it was mighty sad that day—but we didn't blame the privy nor the well not far away. In those good old days mosquitoes used to sing the whole long night, but we would keep the house tight closed and thus avoid the bite; but Pedro got the ague and Maria pined away—mosquitoes—foul air—privy, and the well not far away. We used to think that death was just a punishment for sin—the sin of ignorance, I say! So let us now begin to try and get the windows screened but open night and day, and a sanitary privy with the well quite far away. Let's try and wash our face and hands, let's clean the back yard, too; let's rid ourselves of fevers and the chills and ague crew. Let in the air and sunshine but keep the fly away from the place used for a privy with the well far, far away.

—*Philippine Health Service Bulletin.*



CONVENTIONS, CONFERENCES, MEETINGS

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| July 16-17, Seattle, Wash., Washington Health Officers' Association. | Southwestern Tuberculosis Conference. |
| August (—), Florida State Health Conference. | September 13-17, San Francisco, Cal., American Public Health Association. |
| August 10, Portland, Ore., American Society of Civil Engineers. | September 14-15, Springfield, Ill., Conference Illinois Officials and State Department of Public Health. |
| August 20-21, Denver, Colo., National First Aid and Rescue Contest. | September 16-17, Springfield, Ill., Illinois Health and Welfare Association. |
| September, Oklahoma City, Okla., Oklahoma Tuberculosis Association. | September 22, Kentucky Tuberculosis Association. |
| September 6-7, Omaha, Neb., Missouri Valley Medical Society. | September 22-24, South Bend, Ind., Indiana State Medical Association. |
| September 6-10, Holyoke, Mass., New England Water Works Association. | September 29-October 3, Cleveland, O., National Safety Council. |
| September 7-8, Ogden, Utah, Utah State Medical Association. | October 4-10, Montreal, Canada, American Association of Occupational Therapy. |
| September 7-9, Saratoga Springs, N. Y., Convention of Health Officers of New York. | October 4-10, Montreal, Canada, American Hospital Association. |
| September 9, Providence, R. I., Rhode Island Medical Society. | October 9, Ottawa, Canada, Canadian Association Prevention Tuberculosis. |
| September 9, San Francisco, Cal., California Tuberculosis Association. | October 11-13, St. Louis, Mo., American Child Hygiene Association. |
| September 9-11, Cheyenne, Wyo., Northwestern Tuberculosis Conference. | October 13-15, Chicago, Ill., Association of Railway Surgeons. |
| September 10-11, San Francisco, Cal., | October 22-26, New York City, American Dietetic Association. |

**The A. P. H. A. Meeting at San Francisco is only
Seventy days away!**

September 13-17, 1920.

Plan your vacation so as to be there!

STATE HEALTH NOTES— LEGISLATION

National.—The bill (S. 3383 and H. R. 11927) to increase the pay of the Army, Navy, Marine Corps, Coast Guard, Coast and Geodetic Survey, and the Public Health Service was signed by the Vice President and the Speaker of the House of Representatives on May 15 and was approved by the President on May 19. The first section provides for increases as follows: commencing January 1, 1920, commissioned officers of the Army, Navy, Marine Corps and Public Health Service shall be paid in addition to all pay and allowances now allowed by law, increases at rates per annum as follows: Colonels in the Army and Marine Corps, captains in the Navy, and assistant surgeons general in the Public Health Service, \$600, lieutenant colonels in the Army and Marine Corps, commanders in the Navy, and senior surgeons in the Public Health Service, \$600; majors in the Army and Marine Corps, lieutenant commanders in the Navy, and surgeons in the Public Health Service, \$840; captains in the Army and Marine Corps, lieutenants in the Navy, and passed assistant surgeons in the Public Health Service, \$720; first lieutenants in the Army and Marine Corps, lieutenants (junior grade), acting assistant surgeons and acting dental surgeons in the Navy, and assistant surgeons in the Public Health Service, \$600; second lieutenants in the Army and Marine Corps, and ensigns in the Navy, \$420; Provided, That contract surgeons of the Army serving full time shall receive the pay of a second lieutenant.

Another bill which has passed the Senate and House and has recently received the signature of the President is H. R. 12775, an act to amend an act entitled "An act for making further and more effectual provision for the national defense, and for other purposes." Section 10 concerns the Medical Department of the Army and provides for one Surgeon General with the rank of Major General and two assistants with the rank of brigadier generals. Hereafter members of the Army Nurse Corps are to have relative rank as follows: The superintendent shall have relative rank of major; the assistant superintendents, director, and assistant directors, the relative rank of captain; chief nurses, the relative rank of first lieutenant; and nurses, the relative rank of second lieutenant; and as regards

medical and sanitary matters and all other work within the line of their professional duties shall have and shall be regarded as having authority in and about military hospitals next after the medical officers of the Army.

H. R. 9521 is an act to prevent hoarding and deterioration of, and deception with respect to cold storage foods, to regulate shipments of cold storage foods in interstate commerce, and for other purposes. It was passed in the Senate May 17, with amendments and on May 18 the House disagreed with these amendments and asked for a conference. The act requires all goods kept in cold storage more than 30 days to be marked with the date placed in storage, and taken out of storage. It shall be unlawful for any person to ship, deliver for shipment, or sell, in commerce, any article of food that has been held in cold storage for twelve months or more. The Secretary of Agriculture is empowered to enforce the act. The punishment for violation is a fine not exceeding \$1,000 or imprisonment for not more than one year, or both. The sum of \$200,000 is provided to enforce the act.

H. R. 11841 amends an act granting additional quarantine powers and imposing additional duties on the Marine Hospital Service, approved February 15, 1893. It was introduced May 8, 1920, and requires vessels clearing for any port in the U. S. to obtain a bill of health from the consular officer or his medical officer.

H. R. 13627 is to amend an act to authorize the Secretary of the Treasury to provide hospital and sanitarium facilities for discharged sick and disabled soldiers, sailors and marines. It passed the House May 21 and is now before the Senate. It provides for the purchase of a building in the District of Columbia now leased as a hospital.

H. R. 14315 is a bill to authorize an appropriation to enable the Secretary of the Treasury to provide medical, surgical, and hospital services and supplies for patients of the Bureau of War Risk Insurance and of the Federal Board for Vocational Education, Division of Rehabilitation, suffering from neuro-psychiatric and tubercular ailments and diseases, and for other purposes. It was introduced in the House on May 29 and referred to the Committee on Public Buildings and Grounds. This bill provides for three hospitals for neuro-psychiatric patients, one each

in the Central Atlantic Coast states, the region of the Great Lakes, and the North Pacific Coast states. It also provided two hospitals for tuberculosis patients, one in the Rocky Mountain states and one in Southern California. The sum of \$10,000,000 is authorized for this purpose.

The Sundry Civil Bill (H. R. 13870), which passed the House on May 11 and passed the Senate with amendments on May 24 makes the following appropriations for the Public Health Service:

Pay, allowances and commutation of medical officers	\$ 856,000
Pay of acting assistant surgeons...	275,000
Pay of all other employes	740,000
Freight, transportation and traveling expenses	40,000
Fuel, light and water	135,000
Furniture and repairs to same	8,000
Purveying depot, purchase of medical, surgical and hospital supplies	85,000
Hygienic Laboratory	45,000
Marine hospitals	625,000
Medical Examinations, care of seamen, etc.	220,000
Preparation and shipment of remains of deceased officers	5,000
Journals and books	500
Total	\$3,034,500

The following is also provided:

For medical, surgical and hospital services and supplies for beneficiaries (other than war risk insurance patients) of the Public Health Service	\$4,000,000
Quarantine service	255,000
Prevention of epidemics	355,000
Field investigations	300,000
Interstate quarantine	25,000
Rural sanitation	50,000
Pellagra	16,000
Biologic products	50,000
Division of Venereal Diseases	200,000
Hospital and Sanatorium facilities for discharged sick and disabled soldiers, sailors and marines	295,000
This bill also allows	\$1,015,000
to the Interdepartmental Social Hygiene Board.—(J. A. T.)	

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District of Columbia.—H. R 13846 was introduced on April 29 and referred to the

Committee on the District of Columbia. It is a bill to regulate the practice of undertaking and embalming in the District of Columbia, and to safeguard the public health. The bill provides for a board of examiners which shall license all undertakers and embalmers in D. C. after a suitable examination.—(J. A. T.)

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New Mexico.—Amendments have been passed to the Regulations Governing the Reporting and Control of Communicable Diseases by which the names of cases of venereal diseases are to be reported, under special circumstances, where treatment is not continued, or the patient so conducts himself as to be a menace to society. In the latter case the health officer is given authority to isolate such persons.

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North Dakota.—By act of the last legislature, the budget of the North Dakota State Board of Health ceases to operate after July 1, 1920.

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Pennsylvania.—During the year 1919 the Legislature of the State of Pennsylvania passed 11 acts affecting the public health in addition to a number of amendments concerning minor matters.

Act No. 136 authorizes the county commissioners in any county or the authorities of any city of the third class to erect joint hospitals for communicable diseases. Fifteen sections deal with the details of coöperation. By act 166 certain amendments were made to the laws concerning the health boards in cities of the third class. It is provided in these amendments that the council of the city shall have authority to appoint members of the board, their officers and subordinates. The second change in existing laws provides that the city clerk shall be *ex officio* secretary of the board of health.

Act 191 provides for the appointment by the Governor by and with the consent of the Senate, of a Deputy Commissioner of Health in the State Board, to be a physician of at least ten years professional experience and a graduate of a licensed medical college. The salary is to be \$6,500 a year and necessary expenses.

Act 198 is to provide more effectual protection of the public health. It requires evidence of vaccination against smallpox or of immunity to the disease from every child

seeking to enter or attend any of the schools, public or private. Certificates of vaccination must be in accordance with State regulations. Act 210 authorizes the financing by the boroughs of the construction of sewage plants or sewage purification plants.

Act 253 and Act 271 consider the details of medical inspection in the public schools, the act last named taking from boards of school directors the option they formerly possessed of deciding not to have medical inspection in the schools of their districts. Act 400 enumerates the communicable diseases, 26 sections being devoted to details of notification, quarantine, forms and records, technique, etc. Act 411 limits the keeping and slaughtering of animals save under permit of the department of health.

Act 442 makes it unlawful for any individual or association to advertise as being engaged in the business or profession of treating diseases of the generative organs of either sex. It is likewise unlawful for any publisher to insert advertisements of such nature in any of its publications. Penalty, \$1,000 and imprisonment for not more than a year. Act 446 concerns itself with the education of children mentally or physically defective.

The text of these amendments together with the regulations of the Advisory Board of the Department of Health, Commonwealth of Pennsylvania, find place in the official publication of the Department, *Pennsylvania Health Bulletin*, No. 103.



STATE HEALTH NOTES—GENERAL

Alabama.—Dr. L. W. Johnston, of Tuskegee, recently elected President of the Alabama State Medical Association, has been one of the most conspicuous members of the medical fraternity in the state for a number of years. He is a graduate of the Medical Department of the State University and has served for a number of years on the State Board of Censors and the Committee of Public Health of the State Medical Association.

A conference of the County Health Officers of Alabama was held in Montgomery, June 4 and 5, 1920. The State Health Officer, S. W. Welch, M. D., in addressing the group, quoted the statement of Dr. L. L. Lumsden, of the U. S. P. H. Service, made at the conference of the Surgeon General with the state and provincial health officers in Washington, D. C.: "According to data secured in January, 1920, by correspondence with state health officers, there are eighty-eight full-time county health officers employed in the United States, sixteen of whom are maintained by counties in Alabama." Dr. Welch was gratified that each of the 16 health officials was present in response to his invitation, and each was given an opportunity to report upon the activities of his unit, and the progress made during the past six months. These reports revealed a decided advancement in the technique of rural health work.

Two years of experience with numerous

and varied types of sanitary latrines have led, by a steady process of elimination of the impractical and unfit, to the selection of four basic types which are now recommended by the department of health. These are—named in the order of their economic and sanitary value—the chemical toilet—the septic tank; the septic privy and the pit privy.

In towns of 200 or more homes not served by sanitary sewers, the box and can system with scavenger service may be successfully operated; a system of this sort which serves less than 200 homes cannot be self-supporting upon the monthly fee basis, and is therefor impractical in operation.

It had been recognized by many of those present that future success in achieving 100 per cent rural sanitation must depend upon standardized and commercialized equipment for these structures, combined with simplicity of installation. Dr. W. E. Burt, of Talladega county, has demonstrated the feasibility of this by securing from commercial sources the production of the following approved types of equipment, which may be purchased upon application to the health office: A septic tank and septic privy of cement construction, a wooden box for pit type, and cast iron, cement and wooden boxes for the box and can system. The commercialized product shows a distinct gain in economy and ease of installation; it also has the advantage of esthetic values

which will encourage adequate care in operation. It is believed that when the farmer can drive into town and purchase from an intelligent salesman a sanitary appointment for his home, which has been selected as a result of personal inspection and understanding, he will be as eager to make this purchase as he now is to buy other house furnishings which he sees displayed in the shop window.

The Executive Secretary of the State Anti-Tuberculosis Association, Mr. J. M. Graham, gave the Conference his assurance of a complete understanding between the state and county health officials, and the Anti-Tuberculosis Association, which will result in the immediate future in the addition of a special tuberculosis nurse to the staff of the Bureau of Public Health Nursing of the State Board of Health.

The discussions which developed during the meeting were enlivened by comments upon the work now being accomplished by the various divisions of the State Board of Health.

Before adjournment it was decided that a second conference will be held in Birmingham at the end of six months.



Kentucky.—The State Board of Health held its ninth annual Health Officers' Conference May 10 to 15, in Louisville, which included for the first time every public health nurse in the state, the meeting being a complete success. Prominent state and city officials, as well as many physicians and nurses from other states, were present. A paper on "The City Health Department" was read by Dr. Wm. H. Peters, Health Officer of Cincinnati.



Maine.—The Maine Anti-Tuberculosis Association has recently reorganized into the Maine Public Health Association for the purpose of entering into a broader health work in Maine than was possible under the old name and by-laws. Such work as prenatal care, child welfare and venereal disease, as well as tuberculosis work, will be now included in its program. W. A. Harris is its executive secretary. One aim in the reorganization is to unify under one head all the private health organizations in the state and to work more closely with such state departments as the Maine Department

of Health, School Department, Department of Charities and Correction, and others.

Dr. A. L. Smith, of Machias, has been appointed District Health Officer for Hancock and Washington counties. This appointment completes the ranks of the district health officers in Maine, making eight for the state. Dr. Smith, who is a graduate of Jefferson Medical College, Philadelphia, has been a practising physician in Machias since 1896, and for fifteen years has been connected with the U. S. P. H. Service, with the rank of Acting Assistant Surgeon.

Miss Edith M. Soule has been appointed Director of the new State Division of Public Health Nursing and Child Welfare, and will assume her duties in July. Through the coöperation of the Red Cross and the Maine Public Health Association, this division has been made immediately possible to the State Health Department.



Michigan.—The recently appointed health officers in Michigan are: Alpena, Dr. Duncan A. Cameron; Hastings, Dr. C. H. Barber; Charlevoix, Dr. F. F. McMillan; Escanaba, Dr. H. J. Defnet; Hancock, Dr. W. H. Dodge; and Saginaw, Dr. J. H. Powers.

A portable laboratory is under construction by the Michigan Department of Health, under the direction of State Sanitary Engineer Edward D. Rich and Director of Laboratories C. C. Young. It consists of a special body mounted on an automobile chassis and is equipped with the necessary apparatus and materials for bacteriological and chemical analysis of water and for the various kinds of clinical work that the State Laboratory is called upon to do. This summer a campaign to improve conditions affecting public health is to be started at the various summer resorts located in the state. By means of this truck it is believed that work can be done in a very effective and rapid manner. It can also be used in connection with investigation of typhoid fever epidemics and in stream pollution work.

For the purpose of obtaining comparative data in two counties of the state in which conditions are of a contrasted character, the Michigan Department of Health is conducting physical examinations of all

the school children. The reports, when tabulated, should show some interesting findings in view of the totally different conditions in the localities chosen.

"Three Million Fingers" is the striking caption under which the Detroit Department of Health calls attention to the need for cleanliness in places which handle food-stuffs. The citizens receive their meals and supplies from 30,000 different persons, 80 per cent of whom are aliens. Many can neither read nor write the English language, and printed rules and instructions are not readily grasped. The difficulty of preventing disease transmission by food handlers at times of an influenza epidemic may be appreciated from the above.

About 200 children, anemic or tuberculously inclined, are attending special open air schools in Detroit. The Board of Education is arranging for the care of 900 more who have been discovered by the Department of Health nurses and for whom there are now no such provisions.

The Detroit Department of Health has found it necessary to ignore complaints of insanitary dwellings unless made in writing and with the signature of writer attached. Last year 1,213 complaints were found to be without cause and represented the efforts of people to vent their spite on unfriendly neighbors.

Those illegal practitioners of medicine who prey upon the sick, offering quick sure cures for all ailments, are 34 less in number than they were a year ago, according to a recent bulletin of the Detroit Board.

Thirty-seven per cent of the physical defects, exclusive of the teeth, found in school children in Detroit by Health nurses in 1919 were corrected during the year. Ten per cent are under treatment. The remaining 53 per cent are uncorrected.



New Mexico.—A case of Malta fever has been reported in a goat herder in Chaves county. The patient denies the use of goat milk, but drank water from a cistern from which the goats drank and through which they walked.

The State Health Department, in investigating an outbreak of diphtheria at Dilia, in Guadalupe county, found seven carriers out of 47 persons examined. With the con-

trol of the carriers the outbreak rapidly diminished.

A special "Keeping Fit" campaign has been conducted. The exhibit has been shown in 20 high schools to 986 boys and adults. W. W. Raisner and J. V. Hopkins were the field representatives in charge of the exhibits.

Through a questionnaire to its physicians, to which less than half of these medical men replied, it has been determined that only a small portion of the patients with venereal disease in the state are receiving treatment other than by themselves with patent medicines.



New York.—Prompt and vigorous action by the health officer of Fort Covington, Dr. McArtney, undoubtedly prevented a serious outbreak of smallpox in that community recently. Several hundred people who were promptly vaccinated escaped the disease, while the two persons who refused to be vaccinated developed smallpox.

The Bureau of Venereal Diseases of the State Department of Health has been conducting very active campaigns in the following cities: January, Utica; February, Schenectady; March, Binghamton; April, Elmira and Hornell; and May 3, Corning. In addition, work in the rural districts was carried on under the auspices of the Home Demonstration Bureau in the following counties during the months of April and May: Chemung (Elmira), Broome, Tioga, Chenango, Orleans, Monroe, Jefferson and Oneida. Since the bureau was established more than 100,000 people have been reached through its educational propaganda.

The Annual Conference of Health Officers of New York State will be held at Saratoga Springs on September 7, 8 and 9, with headquarters at the Grand Union Hotel.

The Wayne County Red Cross has established two public health nursing districts with Sodus the headquarters for the northern section and Lyons for the southern, the work in the respective districts being facilitated by the use of automobiles furnished by the chapter.

An outline of a lecture on tuberculosis for use before lay audiences in connection with the department set of lantern slides on this subject is now available, and may

be obtained by writing to the Supervisor of Exhibits, State Department of Health, Albany, N. Y.

Dr. Minna Mary Rohn, Health Officer of the Lake George Health District, is now completing a sanitary survey of the shores of Lake George. This will be furnished to the summer residents on the lake.

Glens Falls has also completed a sanitary survey, the report of which is to be distributed to the citizens.

A survey which Dr. Alfred H. Severson, Professor of Preventive Dentistry at Columbia University, declares is the first of its kind ever made in New York City, is being undertaken by the Health Service Department of the New York County Chapter American Red Cross.

All the free dental clinics for children in the city are asked to coöperate in getting together complete and authoritative statistics on the extent and character of the dental needs among the children.

A letter sent by the Department to each of the 47 clinics on Manhattan Island asks their coöperation and requests them to add to their card indexes of cases a type of record card which has been prepared by the Department in consultation with the Association for Improving the Condition of the Poor and the leading dental authorities in the city. The card suggested is of the simplest kind and is designed to make a record of examinations only. It is not to supersede any existing methods of recording examinations and treatments, but it will be uniform for all 47 agencies.

On the basis of returns for twelve months, the Department plans to make a report, showing the scope and character of the needs for dental work among the children in New York City and any need that may exist for increased facilities for free treatment.

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Oklahoma.—The Medical School of the State University of Oklahoma was recently given "A" standing by the Council on Education of the American Medical Association. Dr. LeRoy Long is the dean.

Fully 400 physicians attended the 28th Annual Meeting of the Oklahoma State Medical Association held in Oklahoma City May 18-20, 1920, inclusive.

Pennsylvania.—The State Commissioner of Health is making preparations for the training camp to be held on the grounds of the Mont Alto Tuberculosis Sanatorium on June 28 and to continue until July 2. Those who are to attend are all of the county medical directors and certain of the state nurses. The subjects that will be emphasized include child health, school health, milk inspection and laboratory methods. Special stress will also be laid upon the coördinating of the activities of various civic organizations of each county in the carrying out of the county health work.

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North Carolina.—This state is taking steps through the distribution of advice, suggestions and legal forms of procedure, applicable under the Guilford County Public Morals Act, which was extended to the entire state by enactments of 1919, to combat various vices, especially prostitution. That statute makes using or leasing any building, when that building is devoted to immoral purposes, such as prostitution, gambling or illegal sale of intoxicating liquors, a public nuisance. It makes the building itself and the furniture and fixtures in it also a nuisance. There are two methods by which this nuisance may be abated:

First, If it is established in a criminal proceeding against the owner or lessee of such building that such nuisance exists, an order of abatement shall be entered as part of the judgment in the cause.

Second, By a civil action for injunction brought in the name of the State of North Carolina on the relation of a prosecuting attorney (in case the prosecuting attorney fails to act, by any citizen of the county wherein the alleged nuisance is to be found).

If the injunction is made permanent, a judgment making it so shall include an order of abatement, which order shall direct the removal from the building or place of all the fixtures, furniture, musical instruments or movable property used in conducting the nuisance and shall direct a sale thereof in the manner provided for the sale of chattels under execution. It shall further command the closing of the building, or places, against its use for

any purpose, and so keeping it closed for a period of one year, unless sooner released.

This method of repressing prostitution does not involve the expenditure of public funds for the maintenance of persons convicted of violating the law. The cost of court procedure is at least partially covered by proceeds from the required sale of furniture found in such houses.

With a typhoid death rate that has been steadily reduced during each of the past five years, the State Board of Health is preparing for another intensive effort against this most easily preventable of all the preventable diseases that annually take the lives of North Carolinians. Through its field men this summer the State Board of Health will strive for the vaccination of a minimum of 50,000 persons.

The work will be directed by Dr. Charles S. Mangum, of the medical faculty of the University of North Carolina, and Dr. Luther T. Buchanan of the medical faculty of Wake Forest College.



South Carolina.—The Darlington County Health Department, in coöperation with the County Board of Education, began a campaign against the house fly on April 6. A feature of this campaign was the contest for the school children. Prizes were offered to the school children of the county drawing the most attractive posters showing the house fly as a carrier of disease.

Separate contests were arranged for the white and colored schools. The first prize was \$20.00; second, \$10.00, and third, \$5.00.

The contest closed on April 30, with 129 contestants from the schools of white children and 31 from the negro schools. It is presumed that the smaller number of the latter was on account of the closing of the schools during the time of the contest. The prize winners in the white schools were all girls, while of the three in the schools for colored children, the second and third prizes were taken by boys.

For one of the results of the campaign 316 homes of white people have been screened against flies, and the houses of 77 of the darker race.



Virginia.—During the first four months of 1920 there have been 1,821 reported cases

of smallpox in the state, with six deaths, against 770 reported cases in the same period of 1919 and ten deaths for the entire year of 1919. During 1917 the disease caused but two deaths, while in 1918 six deaths were attributed to it. In January, 1919, there were 129 cases, against 467 in January, 1920. In February, 1920, the disease reached its apex for the season, with 703 cases, against 113 for the corresponding month of last year. In March the figures were 326, against 261 for March, 1919, while in April they were 235 and 267 cases, respectively. During April of this year smallpox was reported in 34 of the 100 counties and during the year it has appeared in approximately half of the counties of the state.

Nearly three times as many women are dying from the perils of motherhood as would succumb if all of them had the benefit of the care of painstaking physicians. According to a study of Virginia vital statistics made by the State Registrar, Dr. W. A. Plecker, there is but one death out of 500 births where the mothers have proper and competent attention. On the other hand, under conditions as they exist, with a large proportion of mothers deprived of such painstaking care, the maternal death rate actually is one to every 185 births, making maternity second only to tuberculosis in its danger to women between the ages of 15 and 45 years.

State Health Commissioner Ennion G. Williams urges the more general use of whooping cough or pertussin vaccine in dealing with epidemics of this disease so dangerous to small children. Excellent results are obtained, even where the child has begun to cough. The use of the vaccine is recommended when whooping cough breaks out in the neighborhood and is urged where the children have been exposed. Its use modifies the cough, even after the disease has become well-seated.

State health workers are very much pleased by health work undertaken voluntarily by the senior class of the St. Paul Normal and Industrial School, an institution for colored children at Lawrenceville. This class, following a course given it in physical inspection of school children by Dr. Mary Evelyn Brydon, of the Bureau of Child Welfare of the State Department

of Health, inspected the 51 children in the primary grade of the school with the following results: Ten were found with defective hearing, 39 had defective teeth, and two were suffering from throat trouble.



West Virginia.—The State Medical Association for the past two years has devoted one night exclusively to the discussion of public health questions. On the 19th of May a night meeting was addressed by Dr. Carl F. Raver on "The Necessity for a New Vital Statistic Law"; by Dr. S. L. Jepson, Health Commissioner, on "The Health Center as a Factor in Disease Control," and a great treat was given to the large audience by an address by Assistant Surgeon General A. J. McLaughlin on "Preventive Medicine."



Wisconsin.—To acquaint medical men of the state more fully with their obligations as guardians of the public health, representatives of the Wisconsin State Board of Health recently visited a number of county medical societies and addressed them on public health movements whose success is largely dependent upon the practicing physicians. These speakers were Dr. Robert Oleson, acting Epidemiologist; Dr. W. D. Stovall, Director of the State Laboratory; and Dr. I. F. Thompson and Dr. G. W. Henika, of the Bureau of Social Hygiene.

Citizens of Appleton, Wis., and adjoining communities have subscribed \$500,000 to build a new St. Elizabeth's hospital to enlarge the city's hospital facilities which are now totally inadequate for the demand.

Dr. A. J. Dana has been elected health officer of Fond du Lac, Wis., to succeed Dr. N. J. Malloy, resigned.



Nova Scotia.—The Province is greatly encouraged at the approval of the program suggested by the Nova Scotia Provincial Branch of the Red Cross, by the League of Red Cross Societies, Geneva.

The splendid public health course for nurses outlined in this program, organized under the auspices of Dalhousie University in coöperation with various other bodies in the City of Halifax and financed by free scholarships granted by the Red Cross, is about to be very greatly supplemented. Col.

Frank V. Woodbury, who has recently been demobilized from the Army Medical Service, has been appointed by the Executive of the Nova Scotia Branch of the Provincial Red Cross to devote his entire time to the organization, selection of staff, and working out of details of equipment and transport for the two traveling clinics that are to go throughout the province during the months of July and August.

These clinics are to be organized on a semi-military basis and will carry with them trained specialists with operating room outfit and complete equipment for removing tonsils and adenoids and correction of other remedial defects found in school children in the remote sections of the province; a dentist with chair and outfit for cleansing and putting into hygienic condition the mouths of school children unable to get such service; a tuberculosis specialist, who will coöperate with the family doctor in helping determine the diagnosis where the local physician seeks advice; an eye specialist to give advice and to fit or prescribe lenses where advisable; a nursing corps to assist the doctors in their operative procedures, some trained to go into the homes of the tuberculous to establish such sanitary reforms as may be required; and some of the doctors and some of the nurses to be trained in health teaching. The entire personnel will coöperate closely with the local family doctor.

The plan of the Red Cross even contemplates carrying with these traveling clinics facilities for impressing sanitary lessons by educational moving picture films and in communities where moving pictures may not be shown, graphic lessons by projecting lanterns, the lecturers with the party being trained to elaborate and supplement such graphic lessons.

It is believed that the traveling clinics planned for Nova Scotia will have very far-reaching effects throughout this province and throughout Canada, both in promoting public health and in relieving life handicaps in isolated communities, such as the smaller fishing villages.

Full diaries are to be written up of the experiences of those associated with the traveling clinics, and publicity will be given in the press to the progress of the movement.